AUG 0 7 2006

Approved for use through 09/30/2008, OMB 0651-0031

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PETITION FO	R EXTENSION OF TIME UNDER 37	Docket Number (Options)							
	FY 2005	84454							
(Green must	munt to the Consolidated Appropriations Act, 200								
			Filed 19 August	2003					
Application Nur									
	otical Fiber Coupler	<del></del>	Examiner I Doan						
Art Unit	2874		J. Dour						
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.									
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):									
		<u>Fee</u>	Small Entity Fee	* 00 00					
EX C	one month (37 CFR 1.17(a)(1))	\$120	\$60	\$ 120.00					
□ T	wo months (37 CFR 1.17(a)(2))	\$450	\$225	\$					
П т	Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$					
□F	Four months (37 CFR 1.17(a)(4))	\$1590	\$795	s					
☐ F	ive months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$					
Applicant claims small entity status, See 37 CFR 1.27.									
A check in the amount of the fee is enclosed.									
Payment by credit card. Form PTO-2038 is attached.									
The Director has already been authorized to charge fees in this application to a Deposit Account.									
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 14-0590 . I have enclosed a duplicate copy of this sheet.									
WARNING: Information on this form may become public. Gredit card information should not be included on this form.  Provide credit card information and authorization on PTO-2038.									
Plotting Clarit Celo Intelligence and declaring and the second									
I am the applicant/Inventor.									
assignee of record of the entire Interest. See 37 CFR 3.71.									
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).  attorney or agent of record. Registration Number 53372									
attorney or agent under 37 CFR 1.34.									
Registration number if acting under 37 CFR 1.34									
			9000						
Jean-Paul A. Nasser			401-832-4736						
	Typed or printed name	Telephone Number							
NOTE: Signatures of all the inventors or easignees of record of the entire interest or their representative(s) are required. Submit multiple forms if moss than one									
algrature is required, see below.									
☐ Total of	forms are s	ubmitted.							
This collection of inf	formation is required by 37 CFR 1.138(a). The information are configuration. Confidentially is propertied by 35 U.S.	ion is required to obtain o	r retain a burnefit by the public with and 1.14. This collection is estima	ich is to file (and by the feet to take 6 minutes to					

USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This conscious is distingted to take a filtrace or complete, including genering, preparing, and submitting the complete from the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burdon, should be earl to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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## AUG 0 7 2006

PTO/8B/21 (07-08) Approved for use through 09/30/2009, CMB 0951-0031
U.S. Petent and Tredemark Office; U.S. DEPARTMENT OF COMMERCE netion unless it claritava a valid OMB control number. Index the Processor's Reduction Act of 1695, no persons are required to resound by **Application Number** 10/644.549 Filing Date TRANSMITTAL 19 AUGUST 2003 First Named Inventor FORM LYNN T. ANTONELLI ET AL. Art Unit Examiner Name J. DOAN (to be used for all correspondence after initial (litry) Alterney Docket Number 84454 Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance Communication to TC 1 Fee Transmittal Form Drawing(s) Appeal Communication to Board Licensing-related Papers Fee Attached of Appeals and Interferences Appeal Communication to TC (Appeal Hotice, Brief, Reply Brief) Petition Amondment/Reply Petition to Convert to a Proprietary Information Provisional Application Power of Attorney, Revocation Stehas Letter Affidavita/declaration(s) Change of Correspondence Address Other Enciceure(s) (please identify Terminal Discisimen Extension of Time Request below): Request for Refund Express Abandonment Recuest Information Disclosure Statement CD, Number of CD(s) Landscape Table on CD Certified Copy of Priority Remarks Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name NAVAL UNDERSEA WARFARE CENTER, DIVISION NEWPORT **Ekmature** EAN-PAUL A. NASSER Darte 63372 CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being faceimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Correctionor for Patente, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. Signature ZOUN au lasser Date 8-7-2006 JEAN-PAUL A. NASSER Typed or printed name

This collection of information is required by 97 CFR 1.5. The information is required to obtain or ratain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 95 U.S.C. 122 and 97 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the including less. Any comments on the amount of time you require to complete this form sandor suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commissioner, P.O. Bink 1450, Alexandria, VA 22213-1450. DO NOT SEND FIES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Partents, P.O. Box 1450, Alexandria, VA 22213-1450.

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PTQ/88/17 (01-06)

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FEE TRANSMITTAL											
			Application Number		10/844,549						
		-	Filing Date		19 AUGUST 2003						
For FY	2006	-	First Named Invent		LYNN T. ANTONELLI ET AL.						
Applicant claims small entity of	, <u> </u>	Examiner Name	J. DOAN								
			Art Unit	2874							
TOTAL AMOUNT OF PAYMENT	(\$) \$120.00	<u></u>	Attorney Docket No	o. <u>84454</u>							
METHOD OF PAYMENT (check all that apply)											
Check Credit Card Momey Order None Other (please identify):											
Deposit Account Deposit Ac	count Number <u> 14-0590</u>		Deposit Accou	unt Namer <u>NUV</u>	<u>/C</u>						
For the above-identified dep	poets account, the Directo	yr io herek	y authorized to: (c	check all that ap	ply)						
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee											
Charge any additions	el fee(s) or underpaymen	ts of fee(	(a) Credit ar	ny overpayment	8						
under 37 CFR 1.16 a WARDENG: Information on this form th	my become public. Credit	card infor	mation should not !	he included on th	ds form. Provid	e credit card					
information and authorization on PTO-	L2038.										
FEE CALCULATION (All the f			ig or may be a	Inject w a be	cua gar						
1. BASIC FILING, SEARCH, A	IND EXAMINATION F ING FEES	SEARC	:H FEES E	EXAMINATION	N FEES						
	Small Entity		Small Entity	Small	Entity	Fees Paid (5)					
Application Type Fee!		Fee (\$)	Fee (3)		5 ( <b>2</b> )	TOWN TOWN					
Utility 300		500	250		-						
Design 200		100	50		55 -						
Plant 200		300	150		80 -						
Reissue 300	• • •	500	250	600 30							
Provisional 200	100	0	0	0	0 -	all Emilty					
2. EXCESS CLAIM FEES Fee Description				ſ		Fee (\$)					
Each claim over 20 (includi	ng Reissues)				50	25					
Each independent claim over	ar 3 (including Reissu	Eŝ)			200 360	100 180					
Multiple dependent claims Total Claims Extra	Cleims Fee (3)	Fee (	Paid (3)	N	you Tultiple Depen						
20 or HP =	X				Fee (\$)	Fee Paid (8)					
HP = highest number of total cialms		See	Paid (9)	_							
- 3 or HP =	Claims Fee (5)	=	36131								
HP = highest number of independent	claims paid for, if greater the	BN 3.									
3. APPLICATION SIZE FEE If the specification and drawi	mos exceed 100 sheet	s of papy	er (excluding ele	etronically fil	ed segmence	or computer					
listings under 37 CFR 1.5	(2(e)), the application	size fee	due is \$250 (\$12	25 for small en	ntity) for eac	h additional 50					
cheete or fraction thereof	See 35 II S.C. 41(a)	(1YG) ar	nd 37 CFR 1.160	(s)		Fee Paid (\$)					
<u>Total Sheets</u> - 100 =	Sheets Manker	/OI SHAD	(Lonung rib to a My)	k (sequan alor		_ 0					
4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)  Face Paki (5)											
Other (e.g., late filing surcharge): PETITION FOR EXTENSION OF TIME \$120.00											
Signature Season Paul A. Masson Registration No. 53372 Telephone 401-832-4738											
Bignature Daya - La		n									

Name (PrintType) YEAN-PAUL A NASSER This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an explication. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the emount of time you require to complete this form and/or suppositions for reducing this burden, should be sent to the Chief information Officer, U.S. Petent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND REES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissionar for Patients, P.O. Box 1450, Alexandria, VA 22313-1450.

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